



INNOVATIVE CLINICAL PROGRAMS  
REQUIRE  
INNOVATIVE FUNDING MODELS

# Sound Health Background

- Founded in 1966
- Comprehensive provider of mental health and addiction treatment services
- Supporting the most vulnerable populations in the King County area
- Evidence-based clinical care model: Reaching Recovery
- 12 outpatient/day-treatment clinics (+ school-based and in-home care);  
3 inpatient facilities; hundreds of housing units
- > \$60 million annual revenue

# Services Overview

- Outpatient counseling and case management serving adults, children and families, deaf or hard of hearing, developmentally disabled, and criminal or juvenile justice involved adults and youth
- Addiction/substance use disorder treatment
- Residential care (inpatient) services
- Family oriented services (Domestic Violence, Family Counseling)
- Services supporting transition from homelessness (incl. housing)

# The Problem: Financial Context

## Sound Program Portfolio Report

### Program

### Contribution

### Margin %

#### Outpatient Mental Health

North / East Region Summary	15%
Central Region Summary	15%
South Region Summary	22%
IDD Community Networks Summary 12-230	23%
Forensics - Sound Re-Entry Summary 12-433	25%
Outpatient Mental Health Summary	19%

#### Other Clinical Programs

TSP Transition Support Program Summary 204	49%
ECS Expanded Community Services Summary	39%
WISe Wraparound with Intensive Services Summary	34%
Homeless Services Summary	38%
PATH Projects for Assistance in Transition from Homelessness Summary	(9%)
SSVF Supportive Services for Veteran Families Summary 15-525	(2%)
The Willows Summary 17-491	(4%)
Residential Care Summary	(15%)
SUD Substance Use Disorder Services Summary	(36%)
IDD Crisis Stabilization Team CST Summary 12-231	17%
Sound Re-Entry Housing Summary 12-436	(171%)
Clinical Programs Summary	12%

# Program 1: MSSP (Middle School Support Program)

- Community need: Students/staff in schools need support beyond billable tx
- Program description/results: Full-time on-site MHP to engage with students and staff in problem solving, creating strategies for success. (need data)
- Current funding model: Family foundation operating grant
- Current funding status: **Green** (but “on watch” due to sole-source funding); also only in one school – need funding for expansion
- Options: Additional foundation grants, school district/OSPI funds

# Program 2: Emergency Services Co-Responder

- Community need: Emergency responders confronted with situations involving individuals with behavioral health conditions; increased risk/complexity
- Program description/results: Mental health professional accompanies police in responding to situations; participates in assessing/addressing the situation
- Current funding model: Start up funding from donation; city council appropriated funds to continue
- Current funding status: **Yellow**
- Options: Lobby council for add'l funding, identify add'l state/federal grants, expand to a regional model for

## Program 3: The Willows

- Community need: Mothers post-tx need stable housing to reunite with children
- Program description/results: Supportive, stable, safe family housing with clinical care and assistance in identifying/securing housing post-graduation.
- Current funding model: For every \$100 dollars of expense, \$13 are supported by clinical care revenue and \$15 by housing subsidies/client rent, leaving \$72. Current operating grant provides \$21; the funding gap is \$51.
- Current funding status: Red.
- Options: Lobby for state resources, pursue new clinical services payment model, identify additional operating

# Group Problem Solving / Idea Generation

Table discussion:

- What innovative programs has your organization launched? What was the community benefit?
- How were the programs initially funded? How has funding been sustained or augmented? Are the programs financially stable and sustainable over time?

Report out:

- Share highlights of the table discussion.
- What innovative funding approaches and ideas can we learn from as a group?